

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8016	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Raymond C Ventrone P.O. Box, Bldg., Room No., if any Street 613 Hope Street City Pittsburgh State Pennsylvania ZIP Code + 4 15220	4. Name, file number, and address of labor organization. Name Boilermakers Local Lodge 154 Labor Organization File Number 031-850 P.O. Box, Building and Room Number, if any Street 1221 Banksville Road City Pittsburgh State Pennsylvania ZIP Code + 4 15216
5. Position in labor organization. Business Manager	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Northeast Area Apprenticeship Program Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 297 Burnside Avenue City East Hartford State Connecticut ZIP Code + 4 06108	7.a. Nature of Interest, Transaction, or Income. July 21-22, 2004 - Apprenticeship Banquet and Social The Boilermakers Apprenticeship Program provides the Boilermaker Construction Industry with workers that are qualified in all phases of the trade through an intensive training program. 7.b. Amount. \$115

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed Raymond C. Ventrone	On 08/11/2005 Date	412-343-3072 Telephone Number

Name of Person Filing **Raymond Ventrone**

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

9. Business deals with:

☐

a. Labor Organization

☐

b. Trust

☐

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.

Name of Person Filing Raymond Ventrone

File Number U-

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name MOST Program

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 800

Street 754 Minnesota Avenue

City Kansas City

State Kansas

ZIP Code + 4 66101

7.a. Nature of Interest, Transaction, or Income.

February 25, 2005 - Reception/Dinner
Joint labor-management trust between the
International Brotherhood of Boilermakers and the
National Association of Construction Boilermaker
Employers focusing on Safety Training and
Awareness.

7.b. Amount.

\$65

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name NACBE

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street Post Office Box 190

City Geneva

State Illinois

ZIP Code + 4 60134

7.a. Nature of Interest, Transaction, or Income.

February 23, 2004 - Employers Reception
National Association of Construction Boilermaker
Employers provides assistance and support with the
Union and the Contractors.

7.b. Amount.

\$40

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

7.a. Nature of Interest, Transaction, or Income.

7.b. Amount.